

# APPLICATION DATA SHEET

## **Application Information**

Application Type::	Nonprovisional
Subject Matter::	Utility
Title::	AROMATIC LIVER X-RECEPTOR MODULATORS
Attorney Docket Number::	PHA 4007.1 (01488/1 US)
Small Entity?::	No
Petition Included?::	No
Licensed US Govt. Agency::	No
Secrecy Order in Parent?::	Yes

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Nizal
Middle Name::	S.
Family Name::	Chandrakumar
City of Residence::	Vernon Hills
State or Province of Residence::	IL
Country of Residence::	US
Street of Mailing Address::	4901 Searle Parkway
City of Mailing Address::	Skokie
State or Province of Mailing Address::	IL
Postal Code of Mailing Address::	60077

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Christopher
Middle Name::	R.

Family Name:: Dalton  
City of Residence:: Mundelein  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 4901 Searle Parkway  
City of Mailing Address:: Skokie  
State or Province of Mailing  
Address:: IL  
Postal Code of Mailing Address:: 60077

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: W.  
Family Name:: Malecha  
City of Residence:: Libertyville  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 4901 Searle Parkway  
City of Mailing Address:: Skokie  
State or Province of Mailing  
Address:: IL  
Postal Code of Mailing Address:: 60077

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: B.  
Family Name:: Tollefson  
City of Residence:: Hainesville  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 4901 Searle Parkway

City of Mailing Address:: Skokie  
State or Province of Mailing  
Address:: IL  
Postal Code of Mailing Address:: 60077

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jennifer Ann

Middle Name::  
Family Name:: Van Camp  
City of Residence:: Glencoe  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 4901 Searle Parkway  
City of Mailing Address:: Skokie  
State or Province of Mailing  
Address:: IL  
Postal Code of Mailing Address:: 60077

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.K.  
Status:: Full Capacity  
Given Name:: Phillip  
Middle Name:: B.  
Family Name:: Cox  
City of Residence:: Grayslake  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of Mailing Address:: 4901 Searle Parkway  
City of Mailing Address:: Skokie  
State or Province of Mailing  
Address:: IL  
Postal Code of Mailing Address:: 60077

**Correspondence Information**

Correspondence Customer Number:: 000321

**Representative Information**

Representative Customer Number:: 000321

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non- Provisional claiming priority from	60/411,362	09/17/02
This application	Non- Provisional claiming priority from	60/436,240	12/23/02

**Assignee Information**

Assignee Name:: Pharmacia Corporation